

SERIAL NUMBER <p style="text-align: center;">09/314,958</p>	FILING DATE <p style="text-align: center;">05/20/99</p>	CLASS <p style="text-align: center;">358</p>	GROUP ART UNIT <p style="text-align: center;">2724</p>	ATTORNEY DOCKET NO. <p style="text-align: center;">P17948</p>
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APPLICANT

JUNICHI IIDA, YOKOHAMA-SHI, JAPAN.

****CONTINUING DOMESTIC DATA*******
VERIFIED NONE
JP

****371 (NAT'L STAGE) DATA*******
VERIFIED NONE
JP

****FOREIGN APPLICATIONS*******
VERIFIED **JAPAN** **JP11-18998** **01/27/99**
JP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/18/99

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	JPX	19	18	2
Verified and Acknowledged <u>JP</u> <u>J.P.</u>					
<small>Examiner's Initials</small>		<small>Initials</small>			

ADDRESS

SEE CUSTOMER NUMBER: 007055

TITLE

NETWORK FACSIMILE APPARATUS AND TRANSMISSION METHOD

FILING FEE RECEIVED <p style="text-align: center;">\$760</p>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="margin-bottom: 5px;"><input type="checkbox"/> All Fees</div> <div style="margin-bottom: 5px;"><input type="checkbox"/> 1.16 Fees (Filing)</div> <div style="margin-bottom: 5px;"><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</div> <div style="margin-bottom: 5px;"><input type="checkbox"/> 1.18 Fees (Issue)</div> <div style="margin-bottom: 5px;"><input type="checkbox"/> Other _____</div> <div style="margin-bottom: 5px;"><input type="checkbox"/> Credit</div>
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